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03945 U.S. PTO
10/663152
09/15/03

**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

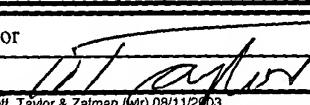
Attorney Docket No. 6398P001

First Inventor James M. Cleeves

Title

Spark Plug

Express Mail Label No. EV336585523US

APPLICATION ELEMENTS		ADDRESS TO:																													
See MPEP chapter 600 concerning utility patent application contents		Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450																													
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i>		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)																													
2. <input checked="" type="checkbox"/> Applicant claims small entity status. <i>See 37 CFR 1.27.</i>		8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i>																													
3. <input checked="" type="checkbox"/> Specification <i>(preferred arrangement set forth below)</i> <ul style="list-style-type: none"> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) - Abstract of the Disclosure 		a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies																													
4. <input checked="" type="checkbox"/> Drawing(s) <i>(35 U.S.C. 113)</i> <i>[Total Sheets 6]</i>		9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))																													
5. Oath or Declaration (signed) <i>[Total Pages 5]</i> <ul style="list-style-type: none"> a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i> <ul style="list-style-type: none"> i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> <i>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</i> 		10. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i>																													
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i>																													
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:		12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations																													
<input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) <i>Prior application Information: Examiner _____</i>		13. <input type="checkbox"/> Preliminary Amendment <input type="checkbox"/> Application Amended to Reflect Claim of Priority																													
14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i>		15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>																													
16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). <i>Applicant must attach form PTO/SB/35 or its equivalent.</i>		17. <input type="checkbox"/> Other: _____																													
18. CORRESPONDENCE ADDRESS																															
<input type="checkbox"/> Customer Number		or <input checked="" type="checkbox"/> Correspondence address below																													
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">Name</td> <td colspan="3">Edwin H. Taylor</td> </tr> <tr> <td colspan="4">Blakely, Sokoloff, Taylor & Zafman LLP</td> </tr> <tr> <td>Address</td> <td colspan="3">12400 Wilshire Boulevard, Seventh Floor</td> </tr> <tr> <td>City</td> <td>Los Angeles</td> <td>State</td> <td>California</td> </tr> <tr> <td>Country</td> <td>USA</td> <td>Telephone</td> <td>(408) 720-8300</td> </tr> <tr> <td></td> <td></td> <td></td> <td>Zip Code 90025-1030</td> </tr> <tr> <td></td> <td></td> <td></td> <td>Fax (408) 720-8383</td> </tr> </table>				Name	Edwin H. Taylor			Blakely, Sokoloff, Taylor & Zafman LLP				Address	12400 Wilshire Boulevard, Seventh Floor			City	Los Angeles	State	California	Country	USA	Telephone	(408) 720-8300				Zip Code 90025-1030				Fax (408) 720-8383
Name	Edwin H. Taylor																														
Blakely, Sokoloff, Taylor & Zafman LLP																															
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			Zip Code 90025-1030																												
			Fax (408) 720-8383																												
Name (Print/Type) <u>Edwin H. Taylor</u>		Registration No. (Attorney/Agent) 25,129																													
Signature 		Date <u>8/11/03</u>																													

Based on PTO/SB/05 (08-03) as modified by Blakely, Sokoloff, Taylor & Zafman (M) 08/11/2003.
 SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT **(\\$)** **635.00**

Complete if Known

Application Number	
Filing Date	
First Named Inventor	James M. Cleeves
Examiner Name	
Group/Art Unit	
Attorney Docket No.	6398P001

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order Other None
 Deposit Account

Deposit Account Number **02-2666**
 Deposit Account Name **Blakely, Sokoloff, Taylor & Zafman LLP**

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) required under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Paid	
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	750	2001	375	Utility filing fee	375.00
1002	330	2002	165	Design filing fee	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1)				(\\$) 375.00	

2. EXTRA CLAIM FEES

Total Claims		Extra Claims	Fee from below	Fee Paid
24	-	20*	= 4 X 9.00 =	36.00
5	-	3*	= 2 X 42.00 =	84.00
				140.00 = \$140.00

Large Entity

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	18	2202	9	Claims in excess of 20
1201	84	2201	42	Independent claims in excess of 3
1203	280	2203	140	Multiple Dependent claim, if not paid
1204	84	2204	42	**Reissue independent claims over original patent
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)				(\\$) 260.00

**or number previously paid, if greater. For Reissues, see below

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code (\$)	
1051	130	2051 65	Surcharge - late filing fee or oath
1052	50	2052 25	Surcharge - late provisional filing fee or cover sheet
2053	130	2053 130	Non-English specification
1812	2,520	1812 2,520	For filing a request for <i>ex parte</i> reexamination
1804	920*	1804 920*	Requesting publication of SIR prior to Examiner action
1805	1,840*	1805 1,840*	Requesting publication of SIR after Examiner action
1251	110	2251 55	Extension for reply within first month
1252	410	2252 205	Extension for reply within second month
1253	930	2253 465	Extension for reply within third month
1254	1,450	2254 725	Extension for reply within fourth month
1255	1,970	2255 985	Extension for reply within fifth month
1404	320	2401 160	Notice of Appeal
1402	320	2402 160	Filing a brief in support of an appeal
1403	280	2403 140	Request for oral hearing
1451	1,510	2451 1,510	Petition to institute a public use proceeding
1452	110	2452 55	Petition to revive - unavoidable
1453	1,300	2453 650	Petition to revive - unintentional
1501	1,300	2501 650	Utility issue fee (or reissue)
1502	470	2502 235	Design issue fee
1503	630	2503 315	Plant issue fee
1460	130	2460 130	Petitions to the Commissioner
1807	50	1807 50	Processing fee under 37 CFR 1.17(q)
1806	180	1806 180	Submission of Information Disclosure Stmt
8021	40	8021 40	Recording each patent assignment per property (times number of properties)
1809	750	1809 375	Filing a submission after final rejection (37 CFR § 1.129(a))
1810	750	2810 375	For each additional invention to be examined (37 CFR § 1.129(b))
1801	750	2801 375	Request for Continued Examination (RCE)
1802	900	1802 900	Request for expedited examination of a design application
Other fee (specify)			

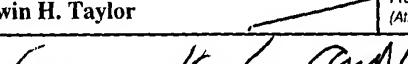
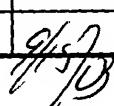
*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\\$)

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Edwin H. Taylor	Registration No. (Attorney/Agent)	25,129	Telephone	(408) 720-8300
Signature				Date	

Based on PTO/SB/17 (08-03) as modified by Blakely, Sokoloff, Taylor & Zafman (wtr) 08/11/2003.
 SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

"Express Mail" mailing label number: EV336585523US
Date of Deposit: Sept. 15, 2003

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Connie Willeson

(Typed or printed name of person mailing paper or fee)

Connie Willeson

(Signature of person mailing paper or fee)

09-15-03

(Date signed)

Serial/Patent No.: To be assigned
Client: James M. Cleeves
Title: Spark Plug

Filing/Issue Date: Herewith

BSTZ File No.: 006398P001
Date Mailed: 09-15-2003

Atty/Secty Initials: EHT/cvw

Docket Due Date: _____

The following has been received in the U.S. Patent & Trademark Office on the date stamped hereon:

<input type="checkbox"/> Amendment/Response (____ pgs.)	<input type="checkbox"/> Express Mail No. <u>EV336585523US</u>	<input checked="" type="checkbox"/> Check No. <u>60089</u>
<input type="checkbox"/> Appeal Brief (____ pgs.) (in triplicate)	<input type="checkbox"/> _____ Month(s) Extension of Time	<input type="checkbox"/> Amt. <u>\$635.00</u>
<input checked="" type="checkbox"/> Application - Utility (<u>25</u> pgs., with cover and abstract)	<input type="checkbox"/> Information Disclosure Statement & PTO-1449 (____ pgs.)	<input type="checkbox"/> Check No. _____
<input type="checkbox"/> Application - Rule 1.53(b) Continuation (____ pgs.)	<input type="checkbox"/> Issue Fee Transmittal	<input type="checkbox"/> Amt: _____
<input type="checkbox"/> Application - Rule 1.53(b) Divisional (____ pgs.)	<input type="checkbox"/> Notice of Appeal	
<input type="checkbox"/> Application - Rule 1.53(b) CIP (____ pgs.)	<input type="checkbox"/> Petition for Extension of Time	
<input type="checkbox"/> Application - Rule 1.53(d) CPA Transmittal (____ pgs.)	<input type="checkbox"/> Petition for _____	
<input type="checkbox"/> Application - Design (____ pgs.)	<input checked="" type="checkbox"/> Postcard	
<input type="checkbox"/> Application - PCT (____ pgs.)	<input type="checkbox"/> Power of Attorney (____ pgs.)	
<input type="checkbox"/> Application - Provisional (____ pgs.)	<input type="checkbox"/> Preliminary Amendment (____ pgs.)	
<input type="checkbox"/> Assignment and Cover Sheet	<input type="checkbox"/> Reply Brief (____ pgs.)	
<input checked="" type="checkbox"/> Certificate of Mailing	<input type="checkbox"/> Response to Notice of Missing Parts	
<input checked="" type="checkbox"/> Declaration & POA (<u>5</u> pgs.) (signed)	<input checked="" type="checkbox"/> Small Entity Declaration for Indep. Inventor/Small Business	
<input type="checkbox"/> Disclosure Docs & Orig & Copy of Inventor's Signed Letter (____ pgs.)	<input checked="" type="checkbox"/> Transmittal Letter, in duplicate	
<input checked="" type="checkbox"/> Drawings: <u>6</u> # of sheets includes <u>9</u> figures	<input checked="" type="checkbox"/> Fee Transmittal, in duplicate	

Other: a copy of this postcard with Certificate of Express Mail.